



Washington State  
Department of Health  
Board of Osteopathic Medicine and Surgery  
Meeting Minutes  
October 15, 2004

The meeting of the Washington State Board of Osteopathic Medicine and Surgery was called to order by Daniel Dugaw, DO, Chair, at 9:00 a.m. The meeting was held at: St. Francis Hospital, 34515 9<sup>th</sup> Avenue South, Board Room, Federal Way, Washington 98003.

Board Members Present: Daniel Dugaw, DO, Chair  
Larry Smith, DO, Vice-Chair  
Thomas Bell, DO  
Ralph Monteagudo, DO  
Thomas Shelton, DO  
Bill Gant, Public Member

Staff Present: Robert Nicoloff, Executive Director  
Melissa Burke-Cain, Assistant Attorney General  
Arlene Robertson, Program Manager  
Holly Rawnsley, Program Manager  
Judy Young, Staff Attorney

Guests in Attendance: Martin Crane, M.D., Board of Directors, Federation of State Medical Boards  
Dale Austin, Senior Vice President/Chief Operating Officer, Federation of State Medical Board  
Terry Scott, PA-C, Washington Academy of Physician Assistants  
Tim Fuller, Board of Pharmacy  
Chuck Cumiskey, Nursing Care Quality Assurance Commission

Open Session

1. Call to Order
  - 1.1 Approval of Agenda  
The agenda was approved as published.

## 1.2 Approval of Minutes

### 1.2.1 June 4, 2004 meeting minutes

The June 4, 2004 minutes were approved as written.

### 1.2.2 August 2, 2004 conference call meeting minutes

The August 2, 2004 minutes were approved.

### 1.2.3 August 16, 2004 conference call meeting minutes

The August 16, 2004 minutes were approved.

## 2. 9:00 a.m. Guest Presentation - Federation of State Medical Boards

Mr. Austin and Dr. Crane were in attendance to familiarize the board members with the Federation of State Medical Boards and to provide an opportunity for the Board to identify areas that the Federation could provide assistance to the Board. The Federation provides multiple services for the 70 member boards.

Services include the United States Medical Licensing Examination (USMLE) which is developed and administered in cooperation with the National Board of Medical Examiners. The most recent project has been enhancement of the USMLE with a clinical skills examination. The Federation Credentials Verification Service (FCVS) provides a central repository for physicians of core documents that can be used for licensure in states that accept them from FCVS. The Physician Data Center provides a comprehensive data base of board actions from member boards. With financial assistance from drug companies Federation staff investigate rogue Internet prescribing sites and turn over their findings to appropriate jurisdictions for prosecution. A physician whose ability to practice medicine safely can be referred to the Post-Licensure Assessment System for evaluation and recommended rehabilitation.

The Federation has been instrumental in developing policies that can be used by member boards, i.e., the Pain Management Guidelines. Current policy development includes Maintenance of Licensure, Scope of Practice, Evaluation of Undergraduate Medical Education and Medical Errors. The Federation monitors federal and state legislation relating to medical regulation. The Federation identifies trends and will

assist member boards in proposing legislation or educating legislators relative to medical regulation. Education is provided at the annual meeting, board member workshops, new executive orientation, executive management seminar and board investigators and attorneys training. Communication is accomplished through the annual handbook, Newslines, weekly electronic Boardnet, Exchange, electronic and hard copy library and the Web site.

3. Laurie Jenkins, Acting Assistant Secretary  
Update on Legislative decision packages and proposals and Department of Health issues

Ms. Jenkins provided background information on services provided by Health Systems Quality Assurance. She explained proposed legislative decision packages and issues such as accountability, timeliness and sanctioning that are being addressed. Legislative requests include a new licensing system that would include a disciplinary tracking component. It is anticipated the system could be shared by Facilities and EMS and Trauma. Additional staffing is being requested for investigators, staff attorneys and the public disclosure section.

4. Licensing Issues  
4.1 Physician Assistant Program Review  
Idaho State University

ISSUE

Consideration of program approval for physician assistant applicants.

ACTION

The program from Idaho State University was approved.

5. Practice Standards/Scope of Practice  
5.1 Educational Workshop Series sponsored by the Federation of State Medical Boards: Promoting Balance and Consistency in the Regulatory Oversight of Pain Care

ISSUE

The Federation is sponsoring educational workshops on regulatory issues pertaining to pain management. Each member board will be eligible to receive three scholarships for attendees. One workshop will be held in Seattle in June 2005.

ACTION

Tom Shelton, DO, is interested in attending. His name will be submitted for one of the Board's scholarships.

Staff will check with board members as we get closer to the December 15<sup>th</sup> deadline for the 2005 workshops to see if additional board members are able to attend one of the workshops.

5.2 American Board of Clinical Metal Toxicology Standard of Care for Increased Total Body Burden of Toxic Metals

ISSUE

Information was provided on the organization's course instruction and examinations for certification. It also provided its standard of care for identifying and treating individuals for toxic metal exposure.

ACTION

The Board determined that it had no position on the organization's standard of care. It is the Board's responsibility to determine the standard of care for osteopathic physicians in Washington State. The merits of care are judged on a case by case basis. The American Board of Clinical Metal Toxicology will be advised of the Board's decision.

5.3 Nursing Care Quality Assurance Commission  
interpretative statement review regarding Surgical  
Technician - Medication Assistance

ISSUE

The Surgical Technologist program has been asked to provide clarification regarding the role of surgical technologists in delivering medications to the surgeon during surgical procedures.

Tim Fuller, Board of Pharmacy, and Chuck Cumiskey, Nursing Commission, were present and spoke to the issues that had been raised. The surgical technologist provides the medication to the surgeon so that the sterile field is not broken by the circulator who is outside the sterile field. Apparently this is common practice in many hospitals.

ACTION

The Board noted that everyone in the surgical suite is under the direct supervision of the physician. The Board had one minor suggestion to include that the medication be dispensed

from an appropriately labeled container. Otherwise the Board supports the interpretative statement as written.

Staff will advise the Surgical Technologist program of the Board's determination.

6. Rules Reviews

6.1 Proposed Rule Making CR101 - WSR 98-07-078

WAC 246-854-030 Osteopathic Physician Assistant  
Prescriptions draft rule

6.2 Proposed Rule Making CR101 - WSR 03-17-056

WAC 246-854-020 Osteopathic Physician Assistant Program  
WAC 246-854-080 Osteopathic Physician Assistant  
Licensure  
WAC 246-854-090 Osteopathic Physician Assistant  
Practice Plan

6.3 Comments received from the public

ISSUE

Review of draft rule language and comments received from interested parties.

ACTION

The Board made no changes to the draft language. It was determined to move forward with the rules process.

6.4 Volunteer Retired Provider Program

6.4.1 Volunteer Retired Provider Malpractice  
Insurance Program draft rule

ISSUE

Information was provided regarding proposed rules implementing the liability insurance program for primary care providers volunteering to serve low-income patients.

ACTION

The Board had no comments on the draft rule language.

7. Correspondence

7.1 Notification from the Drug Enforcement Administration (DEA) that the DEA Controlled Substance Registration Certificate is changing

ISSUE

The Board was provided information on the upcoming DEA registration renewal process and new format of the certificate.

ACTION

No action was required.

8. Program Manager Reports

8.1 Budget Report

Ms. Robertson provided the July 2004 report for review. The budget continues to reflect a positive balance.

8.2 AIM Regional Meeting report

Ms. Robertson reported on topics covered at the recent AIM meeting. Presentations and a discussion session included two different programs that offer training to ethically-challenged physicians. Other issues discussed were license portability, complementary and alternative medicine, and an automated verification system. States in attendance also shared issues their boards were currently addressing.

8.3 Washington Physicians Health Program Statistical Information

The most recent report was shared with the Board. Participant numbers continue to grow with the program.

8.4 Set 2005 meeting dates

The following dates were set for 2005:

January 28

March 18

June 3

July 29 (conference call)

September 16

November 4

8.5 Board and Committee Pay

A policy outlining the types of activities that board members may receive was provided.

9. Executive Director Reports

9.1 Initiative 336

Mr. Nicoloff provided the initiative information pertaining to medical liability insurance. Dr. Dugaw indicated this version was being sponsored by the trial lawyers and that 330 was another option being proposed by the Washington State Medical Association. No action was required.

10. (Open Session) Settlement Presentations  
There were no settlement presentations.

Closed Session

11. Disciplinary Case Reviews - Reviewing Board Member Reports

<u>CASE NUMBER</u>	<u>DISPOSITION</u>
2002-11-0001OP	Closed no cause for action; no violation determined.
2004-02-0004OP	Closed no cause for action; no violation determined.
2004-06-0003OP	Issue a Statement of Charges.
2004-04-0002OA	Closed no cause for action; no violation determined.
2004-07-0001OP	Closed no cause for action; no violation determined.
2003-08-0001OP	Closed no cause for action; risk minimal and not likely to reoccur.
2003-12-0001OP	Closed no cause for action; risk minimal and not likely to reoccur.
2003-09-0003OP	Closed no cause for action; no violation determined.
2003-11-0004OP	Closed no cause for action; evidence does not support a violation.
2003-09-0008OP	Closed no cause for action; no violation determined.
2004-02-0003OP	Closed no cause for action; no violation determined.
2003-02-0003OP	Issue a Statement of Charges
2004-03-0002OP	Issue a Statement of Charges
2004-08-0005OP	Issue a Statement of Charges
2004-06-0001OP	Issue a Stipulation to Informal Disposition

CLOSED BELOW THRESHOLD SINCE 6/4/04

2004-06-0002OP

2004-09-0001OP

- 11.1 Statement of Allegations/Stipulation to Informal Disposition presentations  
There were no presentations.

12. Compliance Reports  
There were no compliance issues.

13. Application Review

Three applications were reviewed by the Board and approved.

The meeting was adjourned at 1:30 pm.

Respectfully Submitted

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Arlene A. Robertson  
Program Manager

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WILL FIND A LIST OF THE HEALTH PROFESSIONS, GO TO  
OSTEOPATHIC PHYSICIANS FOR AGENDAS AND MINUTES.